

524 917

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	STATUS	ID NO.	DATE
FEE DETERMINATION			5-31-01
O.I.P.E. CLASSIFIER		1/2	6/11/01
FORMALITY REVIEW	AM	917	02-31-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓ 5/31/03
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9	✓ 11/9/03
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24	✓ 5/31/04
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30	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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